

CHARGE OF DISCRIMINATION		Charge Presented To:		Agency(ies) Charge No(s):	
This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.		<input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC		461-2019-00624	
Louisiana Commission On Human Rights					
State or local Agency, if any					
Name (indicate Mr., Ms, Mrs.)		Home Phone		Year of Birth	
Mr. Jerry L McKinney		(318) 443-4491		1953	
Street Address					
5308 Hall Street, ALEXANDRIA, LA 71303					
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)					
Name		No. Employees, Members		Phone No.	
RAPIDES PARISH SHERIFF OFFICE		501+		(318) 473-6700	
Street Address		City, State and ZIP Code			
700 Murray Street, ALEXANDRIA, LA 71303					
Name		No. Employees, Members		Phone No.	
Street Address		City, State and ZIP Code			
DISCRIMINATION BASED ON (Check appropriate box(es).)		DATE(S) DISCRIMINATION TOOK PLACE			
<input type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN		Earliest		Latest	
<input type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input checked="" type="checkbox"/> DISABILITY <input type="checkbox"/> GENETIC INFORMATION		07-26-2018		12-20-2018	
<input type="checkbox"/> OTHER (Specify)				<input type="checkbox"/> CONTINUING ACTION	
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s).)					
<p>I began my employment with Rapides Parish Sheriff Office on February 1, 1998 as a jailor, earning \$1,300.00 bi-weekly. On November 29, 2017, I had a serious medical issue. On November 12, 2018, I was transferred from courthouse security working an 8 hour shift to the detention center 3, working a 12 hour shift. On December 5, 2018, I submitted a formal request for a permanent reasonable accommodation due to my disability to allow me to continue working 8 hours for warden Baptist. The request was denied by Major Hollingsworth saying if I could not work 12 hour shifts that he recommends I retire. On December 20, 2018, I was involuntarily retired. The company employs over 500 persons.</p> <p>According to a letter the Sheriff sent to me, I realize you did a good job for 20 years, but we feel it is time you retire.</p> <p>I have been discriminated against because of my disability in violation of the Americans with Disabilities Act, as amended.</p>					
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY - When necessary for State and local Agency Requirements			
I declare under penalty of perjury that the above is true and correct.		I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT			
Digitally signed by Jerry McKinney on 04-26-2019 04:26 PM EDT		SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year)			